Department of Veterans Affairs

MEMOF	RANDUM
Date posted	Initial

February 22, 2007

Chief, Policy and Compliance Division

Transmittal # 102 CHAMPVA Policy Manual

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PUBLICATIONS AND TRANSMITTAL CHANGE FOR THE CHAMPVA PM (POLICY MANUAL)

Explanation of the changes and related index updates to the CHAMPVA PM are in the following summary.

Transmittal changes may include removal of supplemental language previously noted in the body of the policy or the transmittal memorandum.

Chapter 2, Section 13.6, INPATIENT CONCURRENT CARE.

- Amends Authority.
- Removes Procedure Codes.
- Under Policy clarifies concurrent care coverage for providers with the same specialty during same admission, same hospitalization and for different diagnosis; and removes the requirement for medical review.

Chapter 2, Section 14.2, ABORTIONS.

Under Procedure Codes revises format.

Chapter 2, Section 14.10, TRANSCERVICAL BALLOON TUBOPLASTY.

Amends Authority.

Chapter 2, Section 17.4, ORTHOTICS.

• Amends Procedure Codes.

Chapter 2, Section 17.24, IMPLANTABLE INFUSION PUMP.

- Amends Authority.
- Removes Effective Dates.
- Amends Procedure Codes.
- Under Policy removes usage references to all five IIP examples previously cited under this section.

Chapter 2, Section 17.25, V.A.C.® (VACUUM-ASSISTED CLOSURE) DEVICE.

- Amends Authority.
- Under Policy corrects DME reference to read DME (Durable Medical Equipment) and Supplies.

Chapter 2, Section 18.17.2, PREAUTHORIZATION FOR RTC (RESIDENTIAL TREATMENT CENTER) CARE.

Amends Authority.

Chapter 2, Section 20.1, NERVOUS SYSTEM.

- Removes Effective Dates.
- Amends Procedure Codes.
- Under Exclusions adds balloon angioplasty, intracranial, percutaneous; balloon dilation of intracranial vasospasm, initial vessel, each additional vessel in same family or different vascular family; transcatheter placement of intravascular stent(s) intracranial, atherosclerosis stenosis, including angioplasty; and removes reference to dorsal column and deep brain electrical stimulation for the treatment of motor function disorders; transcatheter hepatic arterial embolization for the treatment of cancers that have metastasized to the liver, unresectable heptaocellular carcinoma, and respectable hepatocellular carcinoma, as these procedures are now covered.

Chapter 2, Section 22.1, PHARMACY.

- · Amends Related Authority.
- Under Policy removes reference to drugs which previously required a
 prescription but are now deemed safe and offered over-the-counter and adds
 this language under Exclusions; removes reference to coverage restriction for
 30-day quantity supply of controlled substances (Schedule III, IV, V) as
 CMOPs are presently providing 90-day quantities.
- Under Policy Considerations removes reference to DEA numbers.
- Under Exclusions adds prescriptions for controlled substances written by providers who do not have individually assigned DEA numbers and reference to drugs which previously required a prescription but are now deemed safe and offered over-the-counter.

Chapter 2, Section 24.1. PROSTHETIC DEVICES AND SUPPLIES.

Amends Procedure Codes.

Chapter 2, Section 30.15, REHABILITATION (GENERAL).

- Amends Related Authority.
- Under Policy adds clarification for expanded rehabilitation services and coverage.
- Removes Limitations and adds this language under Exclusions.

 Under Exclusions adds language previously listed under Limitations; adds MIRE device for treatment of diabetic peripheral neuropathy; services that are palliative in nature; services provided at a non-skilled level; and standard bundles of services as an all-inclusive priced unit or services.

<u>Code Index.</u> Amends index to add and delete codes referenced in this transmittal.

Lisa Brown Chief, Policy and Compliance

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